

**TITLE APPLICATION/NOTICE  
Insurance Company Use Only**MV2849 5/2003 s.342.06, 342.065(1)(c) Wis. Stats.  
Received - Date - Opened**Internet form**

Title Number

Amount Received  
Check Cash

Check one.

- ☐ Title Only- Complete Section A. By obtaining Title Only without registration, operation of the vehicle described on this application is not permitted upon public highways.
- ☐ Salvage Title- Complete Section A. A Wisconsin salvage title is issued for:  
\* A vehicle less than 7 years old which has been damaged to the extent that the cost to repair exceeds 70% of its fair market value.  
\* A vehicle which was last titled in another state as a salvage vehicle.
- ☐ Notification Only- Complete Sections A and B. The insurance company is providing notice that they paid a claim for a vehicle less than 7 years old, with damage exceeding 70% of its fair market value as required by s.342.065(1)(c) Wis. Stats. The owner will be notified by the department to submit title for branding.

Check all brands that apply.

- ☐ Insurance Claim Paid - The vehicle is less than 7 years old and was transferred to an insurer upon payment of a claim for damages of 30% through 70% of its fair market value.
- ☐ Flood Damage - The vehicle was damaged by flood to the extent that the estimated or actual cost to repair, whichever is greater, exceeds 70% of its fair market value.
- ☐ Previous Police - The vehicle was previously used as a police vehicle by a law enforcement agency.
- ☐ Previous Taxi - The vehicle was previously used as a taxicab or for public transportation.

**Section A** This form cannot be used if a lien is to be listed. **Make sure:** The odometer information on the title is completed and all previous owners named on the title have signed the assignment area of the title.

Vehicle Year	Make	Model	Color	Vehicle Identification Number	
Insurance Company Name				Claim Number	
Street Address				Date of Loss	Date Acquired
City	State		ZIP Code	Title Fee \$25.00 Walk-in Fee \$5.00 Priority Service Fee \$4.00	
Area Code - Telephone Number				Total Fees Due	

**Section B** **NOTICE to the Wisconsin Department of Transportation**

A claim has been paid to the vehicle owner(s) named below for vehicle damage exceeding 70% of the fair market value. The owner is keeping the vehicle.

Owner Name	Date Claim Paid
Address, City, State, ZIP Code	
<input type="checkbox"/> Title is attached	

**Note to owner:** Wisconsin law requires the owner of a salvage vehicle to apply for a salvage certificate of title. A person who violates this provision may be required to forfeit up to \$5,000. If you did not provide title to the insurer, send this form along with your title to the above address.

Make check payable to: **Registration Fee Trust****Regular Service**

Mail to: Wisconsin Department of Transportation  
P O Box 7949  
Madison WI 53707-7949

**Priority Service:** Include an additional \$4.00

Mail to: Wisconsin Department of Transportation  
P O Box 7306  
Madison WI 53707-7306

(Insurance Company Authorized Agent - Print Name)

**X**

(Insurance Company Authorized Agent Signature)

(Date)